

Office of Campaign and Political Finance

Leominster

Beginning Date:

Ending Date:

☐ 8th day preceding preliminary/primary

☐ 8th day preceding election

☐ 30th day following election
(Town or Special)

☐ 20th day of January
(Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

City or Town of:

Leominster

2015 DEC 31 AM 10 09

Fill in Reporting Period dates:

Beginning Date:

OCT 16 2015

Ending Date:

DEC 31 2015

Type of Report: (Check one)

☐ 8th day preceding
preliminary/primary

☐ 8th day preceding election

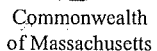
☐ 30th day following election
(Town or Special)

☒ 20th day of January
(Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
12/31/15	<i>[Signature]</i>	3 S. Street	Leominster School Committee



Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

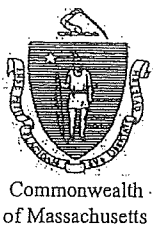
2016 FEB 2 AM 10:21 9:43 AM

Ending Date: 12/31/15

~~20th~~ day of January
(Year-End Report)

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

11/10



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

2016 JAN 4 AM 9 54

City or Town of:

Leominster, MA

Fill in Reporting Period dates:

Beginning Date:

Oct. 16, 2015

Ending Date:

Dec. 31, 2015

Type of Report: (Check one)

☐ 8th day preceding

preliminary/primary

☐ 8th day preceding election

☐ 30th day following election

(Town or Special)

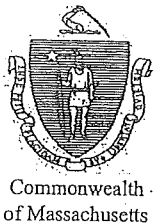
☒ 20th day of January

(Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/4/2016	James Savarin Jr	156 Sylvan ave	City Councilor at Large



Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

City or Town of: Leominster

2016 JAN 22 AM 10 52

Fill in Reporting Period dates:

Beginning Date:

10-16-15

Ending Date:

12-31-15

Type of Report: (Check one)

☐ 8th day preceding

preliminary/primary

☐ 8th day preceding election

☐ 30th day following election

(Town or Special)

☒ 20th day of January

(Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1-22-16	Richard M. Nardella	224 Merriam Ave	Ward 5 City Council



Form CPF M 102: Campaign Finance Report

Municipal Form CITY CLERK'S OFFICE
Office of Campaign and Political Finance LEOMINSTER, MA

Amended

2016 FEB 12 AM 9 00

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning Month Year Ending Month Year
Reporting Period Beginning Ending Oct 16 2015

Type of report: (Check one)
☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Heather Mazzaferro
Full Name of Candidate (if applicable)
Ward 3 School Committee
Office Sought and District
56 Juniper Rd.
Residential Address
978-424-8009
Tel. No. (optional)

Committee to Elect Heather Mazzaferro
Committee Name
Wendy Anderson
Name of Committee Treasurer
56 Juniper Road
Committee Mailing Address
978-424-8009
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
Line 2: Total receipts this period (page 2, line 11) \$ 3710.00
Line 3: Subtotal (line 1 plus line 2) \$ 3710.00
Line 4: Total expenditures this period (page 3, line 14) \$ 990.06
Line 5: Ending balance (line 3 minus line 4) \$ 2719.94
Line 6: Total in-kind contributions this period (page 4) \$ 740.00
Line 7: Total (all) outstanding liabilities (page 4) \$
Line 8: Name of bank(s) used TD Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Wendy Anderson
Treasurer's signature (in ink)

2/12/16
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Heather Mazzaferro
Candidate signature (in ink)

2/12/16
Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
9/29/15	Butler, Donna 1-6 State St, Leominster, MA	100	00	
9/14/15	Chalifoux-Zephier, Susan 437 West St. Leominster, MA	200	00	Executive Director Grinnys Helping Hand, Inc.
10/14/15	D. Cordio Trucking & Son 585 Willard St. Leominster, MA	100	00	
10/6/15	DePasquale, Joseph 37 Arlington St, Leominster, MA	100	00	
10/1/15	Easton, Mark 14 Woods Lane, Lancaster, MA	250	00	VP Information Systems Sterlite Corp.
9/29/15	Freiss, Patricia 24 Briar Rd, Leominster, MA	100	00	
9/30/15	Freiss, Richard 24 Briar Rd, Leominster, MA	100	00	
10/4/15	Gage, Joan 16 Elmford Ave, Fitchburg, MA	100	00	
10/7/15	Marchetti, Mary 64 Eva Dr, Leominster, MA	100	00	
9/15/15	Zephier Jr, Edward 437 West St. Leominster, MA	200	00	Owner United Solutions
Line 9: Total receipts in excess of \$50 (or listed above)		1350	00	
Line 10: Total receipts \$50 and under* (not listed above)		2360	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3710	00	Enter on page 1, line 2

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
9/24/15	Add-A-Sign	136 Pond St. Leominster, MA	Banner	127	63
9/24/15	BJ's Wholesale	115 Erdman Way Leominster, MA	Licence for JA Festival	58	32
9/17/15	Dirt Cheap Signs	7301 Bark Ranch Lago Vista, TX	Yard signs + car magnets	454	35
10/11/15	Dirt Cheap Signs	7301 Bark Ranch Lago Vista, TX	Yard signs	292	95
Line 12: Expenditures over \$50				933	25
Line 13: Expenditures \$50 and under*				56	81
Line 14: TOTAL EXPENDITURES				990	06

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
9/21/15	Edward Zephin Jr.	437 West St. Leominster, MA	Boston Bruins Tickets	\$190. ⁰⁰
9/21/15	Susan Chalifoux Zephin	437 West St. Leominster, MA	Boston Celtics Tickets	\$200. ⁰⁰
Line 15: In-kind over \$50				390. ⁰⁰
Line 16: In-kind \$50 and under				350. ⁰⁰
Line 17: Total In-kind				740. ⁰⁰

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures. **CLERK'S OFFICE**

Fill in dates: Reporting Period Beginning Month 10 Date 16 Year 2015 Ending Month 12 Date 31 Year 2015
LEOMINSTER, MA
2015 FEB 12 AM 9 00

Type of report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Heather Mazzafaro
Full Name of Candidate (if applicable)
Ward 3 School Committee
Office Sought and District
56 Juniper Rd.
Residential Address
978-424-8009
Tel. No. (optional)

Committee to Elect Heather Mazzafaro
Committee Name
Wendy Anderson
Name of Committee Treasurer
56 Juniper Road
Committee Mailing Address
978-424-8009
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 2719.94
Line 2: Total receipts this period (page 2, line 11) \$ _____
Line 3: Subtotal (line 1 plus line 2) \$ _____
Line 4: Total expenditures this period (page 3, line 14) \$ 2531.47
Line 5: Ending balance (line 3 minus line 4) \$ 188.47
Line 6: Total in-kind contributions this period (page 4) \$ _____
Line 7: Total (all) outstanding liabilities (page 4) \$ _____
Line 8: Name of bank(s) used TD Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Wendy Anderson
Treasurer's signature (in ink)

2/12/16
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Heather Mazzafaro
Candidate signature (in ink)

2/12/16
Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total receipts in excess of \$50 (or listed above)			Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/30/15	BJ's Wholesale	115 Erdman Way Leominster, MA	Supplier for Election Night Party	28	35
10/30/15	Hannaford	Lancaster St. Leominster, MA	Decorations for Hall	8	54
10/19/15	Holden Landmark Corp.	1161 Main St. Holden, MA	Advertising	140	00
11/5/15	Luxury Box	899 Central St. Leominster, MA	Election Night Results Party	1065	41
11/2/15	Party City	516 N Main St. Leominster, MA	Decorations for Hall	127	27
10/28/16	Quick Stop Printing	340 Shrewsbury St. Worcester, MA	Campaign postcard	1035	00
10/30/15	TD Bank	15 Monument Sq. Leominster, MA	Bank Maintenance Fee	8	00
11/30/15	TD Bank	15 Monument Sq. Leominster, MA	Bank Maintenance Fee	8	00
12/31/15	TD Bank	15 Monument Sq. Leominster, MA	Bank Maintenance Fee	8	00
10/28/15	USPS	68 Main St. Leominster, MA	Campaign mailing	49	00
10/28/16	USPS	68 Main St. Leominster, MA	Campaign mailing	24	50
10/29/16	USPS	68 Main St. Leominster, MA	Campaign mailing	29	40
Line 12: Expenditures over \$50				2531	47
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				2531	47

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Forms Office
Office of Campaign and Political Finance
LEWISTON, MA

2016 JAN 19 PM 3 11

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates: Reporting Period Beginning Month 10 Date 16 Year 2015 Ending Month 12 Date 31 Year 2015

Type of report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Full Name of Candidate (if applicable)

Office Sought and District

Residential Address

Tel. No. (optional)

CTE CHARLES MILLIONS

Committee Name

JON R. TATA

Name of Committee Treasurer

54 ROSE AVE

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 431
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ 431
Line 4: Total expenditures this period (page 3, line 14) \$ 0
Line 5: Ending balance (line 3 minus line 4) \$ 431
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 3880.06
Line 8: Name of bank(s) used ROLLSTONE BANK + TRUST

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

五

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

[illegible]

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
8/23/13	C MILHAMS	54 ROSA AVE	INITIAL FUNDING	2000-
8/29/13	"	"	ADVERTISING	530.06
9/4/13	"	"	SIGNS	1350-
Line 18: OUTSTANDING LIABILITIES (ALL)				3880.06

Enter on page 1, line 7



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

CITY CLERK'S OFFICE
LEOMINSTER, MA

Fill in dates:

Reporting Period Beginning

Month

Date

Year

10-27-15

2016 JAN 14 AM 10 31

Month

Date

Year

Ending 12-31-2015

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Nona L. Ojala

Full Name of Candidate (if applicable)

Ward 4 School Committee

Office Sought and District

320 Pleasant St

Residential Address

978

Leominster, MA 01453 537-2904

Tel. No. (optional)

Committee to Elect Nona Ojala

Committee Name

Laurie E. Ojala

Name of Committee Treasurer

320 Pleasant St.

Committee Mailing Address

978

Leominster, MA 01453 537-2904

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 461.98

Line 2: Total receipts this period (page 2, line 11)

\$ —

Line 3: Subtotal (line 1 plus line 2)

\$ 461.98

Line 4: Total expenditures this period (page 3, line 14)

\$ —

Line 5: Ending balance (line 3 minus line 4)

\$ 461.98

Line 6: Total in-kind contributions this period (page 4)

\$ —

Line 7: Total (all) outstanding liabilities (page 4)

\$ —

Line 8: Name of bank(s) used Leominster Employees Federal Credit Union

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Laurie E. Ojala

Treasurer's signature (in ink)

Date

1/12/16

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Nona L. Ojala

Candidate signature (in ink)

Date

1/12/16

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	<i>No activity</i>		
Line 9: Total receipts in excess of \$50 (or listed above)		—	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		—	
Line 11: TOTAL RECEIPTS IN THE PERIOD		—	

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

[illegible]

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	<i>No activity</i>			
Line 15: In-kind over \$50				—
Line 16: In-kind \$50 and under				—
Line 17: Total In-kind				—

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	<i>No activity</i>			
Line 18: OUTSTANDING LIABILITIES (ALL)				—

Enter on page 1, line 7



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

File with:
City or Town Clerk or Election Commission

2016 JAN 15 PM 12 36

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Oct 26 2015 Ending Jan 1 2016

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Wayne Allen Nickel

Full Name of Candidate (if applicable)

Ward 2 City Council

Office Sought and District

182 Fifth St

Residential Address

Tel. No. (optional)

Comm to Elect Wayne Nickel

Committee Name

Ruth Ann Nickel

Name of Committee Treasurer

182 Fifth St Leom

Committee Mailing Address

978-5374686

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 370.00

Line 2: Total receipts this period (page 2, line 11) \$

Line 3: Subtotal (line 1 plus line 2) \$

Line 4: Total expenditures this period (page 3, line 14) \$ 0.00

Line 5: Ending balance (line 3 minus line 4) \$

Line 6: Total in-kind contributions this period (page 4) \$

Line 7: Total (all) outstanding liabilities (page 4) \$ 370.00

Line 8: Name of bank(s) used Enterprise Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Ruth Nickel

Treasurer's signature (in ink)

1/15/2015

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Wayne Allen Nickel

Candidate signature (in ink)

1/15/16

Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total receipts in excess of \$50 (or listed above)			Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
Line 12: Expenditures over \$50					
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES					

Enter on page 1, line 4

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				0.00

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/27/15	Wayne Nickel	182 Hill St Leom	Campaign Expenses	370.88
Line 18: OUTSTANDING LIABILITIES (ALL)				370.88

Enter on page 1, line 7



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

File with City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

10/17/2015

Ending Date:

12/31/2015

2016 JAN 20 PM 1 33

Type of Report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ year-end report

☐ dissolution

Deborah Toivonen

Candidate Full Name (if applicable)

Council, Worcester / Leominster, City of

Office Sought and District

14 Macintosh Lane, Leominster, Ma 01453

Residential Address

Telephone Number (optional):

Committee to Elect Deborah Toivonen

Committee Name

Donna Fiduccia

Name of Committee Treasurer

75 Constitution Dr., Leominster, MA 01453

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

1005.00

Line 2: Total receipts this period (page 3, line 11)

310.

Line 3: Subtotal (line 1 plus line 2)

1315.00

Line 4: Total expenditures this period (page 5, line 14)

1215.94

Line 5: Ending Balance (line 3 minus line 4)

99.06

Line 6: Total in-kind contributions this period (page 6)

270.77

Line 7: Total (all) outstanding liabilities (page 7)

21.00

Line 8: Name of bank(s) used: Rollstone Bank & Trust

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Donna Fiduccia

(Treasurer's signature)

Date: 1/20/2016

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date:

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

310.00

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

310.00

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/5/2015	Gazbar Sports Grill	1045 Central St. Leominster, MA 01453	Election Night - appetizers, etc.	175.31
10/29/2015	Holden Landmark Corporation	22 West St., Suite 31 Millbury, MA 01527	Advertising -Champion	401.00
11/9/2015	NorEast Designs	435 Lancaster St., Bldg 20E Leominster, Ma 01453	Campaign Signs	350.00
10/31/2015	Papou's Pizza	285 Central St. Leominster, MA 01453	Pizza, etc. - Meet & Greet	68.65
10/29/2015	Sentinel & Enterprise	808 Main St. Fitchburg, MA 01420	Advertising	160.00
Line 12: Total Expenditures over \$50 (or listed above)				1154.96
Line 13: Total Expenditures \$50 and under* (not listed above)				60.98
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				1215.94

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

[illegible]

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/29/2015	Sentinel & Enterprise	808 Main St. Fitchburg, MA 01420	Advertising - Balance	8.00
9/15/2015	Deborah Toivonen	14 Macintosh Lane Leominster, MA 01453	Printing	13.00
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	21.00



Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

CITY CLERK'S OFFICE
LEOMINSTER, MA

2016 JAN 14 PM 3 50

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning 10 17 2015 Ending 12 31 2015

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Wendy R. Wiiks
Full Name of Candidate (if applicable)
At-Large School Committee
Office Sought and District
142 Blossom Street
Residential Address
978-534-8729
Tel. No. (optional)

CTE Wendy Wiiks
Committee Name
Nancy A. Wiiks
Name of Committee Treasurer
142 Blossom Street
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 109.43
Line 2: Total receipts this period (page 2, line 11) \$ 3835.00
Line 3: Subtotal (line 1 plus line 2) \$ 3944.43
Line 4: Total expenditures this period (page 3, line 14) \$ 3575.57
Line 5: Ending balance (line 3 minus line 4) \$ 368.86
Line 6: Total in-kind contributions this period (page 4) \$ 200.00
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used Leominster Credit Union

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Nancy A. Wiiks
Treasurer's signature (in ink)

January 14, 2016
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Wendy R. Wiiks
Candidate signature (in ink)

1/14/16
Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	See Attached		
Line 9: Total receipts in excess of \$50 (or listed above)			Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD			

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Schedule A: Receipts**Wendy Wiiks**

10/19/2015	Abraham, Barbara 34 Cumberland Road	\$	15.00
11/2/2015	Antonioni, Robert 85D Winter Street Self employed/Antonioni Law Office	\$	1,000.00
10/25/2015	Antonucci, Robert P.O. Box 488, West Falmouth, 02574	\$	50.00
10/25/2015	Ardinger, Thomas 12 Narcissus Road, Leominster, MA 01453	\$	25.00
11/10/2015	Bagley, Thomas 279 Abbott Avenue	\$	50.00
10/25/2015	Bartlett, Arthur 31 Judy Drive	\$	25.00
11/2/2015	Benoit, Paul 63 Liberty Street	\$	50.00
10/25/2015	Blanchette, Michelle 572 High Rock Road, Fitchburg, MA 01420	\$	25.00
10/25/2015	Caponi, Theresa 49 View Street	\$	25.00
10/25/2015	Carboni, Ennio 68 Chester Road, Belmont 02478	\$	50.00
10/19/2015	Carboni, Nicholas 124 Belair Heights	\$	100.00
10/24/2015	Cashman, Susan 30 Elm Street	\$	25.00
10/24/2015	Conlin, Walter 60 Colonial Drive	\$	100.00
10/25/2015	Connally, Barbara 55 Forsythia Road	\$	100.00
10/25/2015	Donatelli, Maureen	\$	30.00

173 Lindell Avenue, Leominster, MA 01453

10/25/2015	Faris, Charles 16 Field Road, Leominster, MA 01453	\$	50.00
10/19/2015	Faris, Colleen 16 Field Road	\$	50.00
10/19/2015	Firmani, Sett 61 Fourth Street	\$	25.00
10/25/2015	Gaudet, Lynn 46 Crestfield Lane, Leominster, MA 01453	\$	40.00
11/2/2015	Gelinas, Charles 106 Merriam Avenue	\$	100.00
10/25/2015	Gelinas, Janis 106 Merriam Avenue, Leominster, MA 01453	\$	50.00
10/24/2015	Holman, Susan 30 North Meadow Road	\$	100.00
10/25/2015	Howlett, Kenneth 33 Sky Lane, Leominster, MA 01453	\$	150.00
10/19/2015	Khan, Mohammed 72 Mountain View Road	\$	25.00
10/25/2015	Lisciotti, Gregg 24 Walden Court President, Lisciotti Development	\$	500.00
10/25/2015	Longo, Karen 132 Hill Street, Leominster, MA 01453	\$	50.00
10/25/2015	Mazzarella, Dean 24 Glendale Street, Leominster, MA 01453 Mayor, City of Leominster	\$	200.00
11/10/2015	McNeill, Lawrence 218 Abbott Avenue	\$	25.00
10/25/2015	Nicewicz, Kenneth 116 Sawyer Road, Bolton, MA 01740	\$	100.00
10/25/2015	O'Brien, William		

	1079 Central Street	\$	25.00
10/25/2015	O'Leary, Eileen 16 Barry Lane	\$	50.00
10/25/2015	Pare, Nicole 29 Oakwind Hollow Road, Leominster, MA 01453	\$	25.00
11/10/2015	Pirro, Linda 727 Lancaster Street	\$	50.00
10/19/2015	Roy, Sheila 199 Ridgewood Drive	\$	50.00
10/25/2015	Salvatelli, Robert 11 Woodside Avenue, Leominster, MA 01453	\$	50.00
10/25/2015	Sampson, Lucille 215 Helena Street	\$	50.00
10/24/2015	Tocci, Virginia 334 Hill Street	\$	25.00
10/25/2015	Tresaloni, Cynthia 148 Stuart Avenue, Leominster	\$	25.00
10/25/2015	VanWert, Allan 43 Theodore Drive, Leominster, MA 01453	\$	25.00
10/25/2015	Wiiks, Nancy 142 Blossom Street, Leominster, MA 01453 Technical support, EMC Corporation	\$	300.00
10/25/2015	Woodland, Kelly 78 Hardy Drive, Leominster, MA 01453	\$	25.00
		\$	3,835.00

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/20/15	Next Day Flyers	435 N. Midland Ave Saddlebrook, NJ 07663	Campaign literature	320	99
10/20/15	Postmaster	68 Main Street Leominster, MA 01453	Stamps	980	00
10/20/15	Staples	289 N. Main St Leominster MA 01453	Supplies	85	52
10/23/15	Staples	289 N. Main Street Leominster, MA 01453	Supplies	79	63
10/24/15	Staples	289 N. Main Street Leominster, MA 01453	Supplies	109	43
12/1/15	Wendy Wiiks	142 Blossom Street Leominster, MA 01453	Reimbursement of loan	2000	00
Line 12: Expenditures over \$50				3575	57
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				3575	57

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
10/24/15	Giambrone Damico, Stephanie	15 Biscuit Hill Drive Leominster, MA 01453	Food / location for Fundraiser	300.00
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				300.00
Line 17: Total In-kind				300.00

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Line 18: OUTSTANDING LIABILITIES (ALL)				0

Enter on page 1, line 7